

**SUMMARY FORM****COLLECTIVE BARGAINING AGREEMENT**  
**PUBLIC SECTOR / NON-POLICE & NON-FIRE****Section I: Agreement Details**

Public Employer:	Township of Montville			County: Morris
Employee Organization:	Morris Council No. 6 White Collar			Employees in Unit 31
Base Year Contract Term:	1/1/2009	12/31/2012	New Contract Term	1/1/2013 12/31/2015
Type of Settlement:	<input type="checkbox"/> Mediated Settlement <input type="checkbox"/> Fact-Finder Recommendation		<input checked="" type="checkbox"/> Voluntary Settlement	<input type="checkbox"/> Super Conciliation

		Column A Base Year - Total Costs (Last Year of Previous agreement)	Column B New Base Year - Total Costs (First Year of Successor agreement)
<b>Section II: Economic</b>		\$1,384,034	\$1,392,242
Item 1 .....	Salary		
Item 2 .....	Increment		
Item 3 .....	Longevity		
Item 4 .....			
Item 5 .....			
Item 6 .....			
Item 7 .....			
Item 8 .....			
Item 9 .....			
Item 10 .....			
Item 11 .....			
Item 12 .....			
Any additional items list on separate sheet		Additional Items	
<b>Section III: Totals - sum of costs in each column</b>		\$1,384,034	\$1,392,242
		(Total)	(Total)

**Section IV: Analysis of new successor agreement****NEW AGREEMENT ANALYSIS**Total Base Year(previous agreement) \$1,384,034

Effective Date (mid/year)	1/1/2013	1/1/2014	1/1/2015			
Percent Increase .....	2%	2%	2%			
Total cost of increase .....	\$8,908	\$27,859	\$28,418			
Total base salary (successor agreement) .....	\$1,392,242	\$1,420,801	\$1,449,217			

**Section V: Impact of Settlement - average annual increase over term of agreement**

Percentage Impact (average per year over term of agreement)	<u>2.00</u>
Dollar Impact (average per year over term of agreement)	<u>\$21,728.00</u>

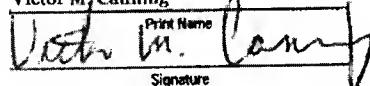
**Section VI**

Health Insurance (Indicate costs associated on each line)	Base Year	Year 1			
Cost of Health Plan .....	\$363,504	\$379,844			
Employee Contributions .....	\$0	\$19,686			
Prescription .....					
Dental .....	\$22,812	\$21,864			
Vision .....	\$3,672	\$3,497			

*The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, she is subject to punishment.***Section VII**

Prepared by:

Victor M. Canning

Print Name  
  
 Signature

Title: Township Administrator

Date: 6/24/2013